			nuary 1, 20				4541 544	****		OTHER!	THAN
	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	SMALL E	L ENTITY	
OTAL CLAIMS		N4 .			. [RATE	FEE		RATE	FEE	
)R		NUMBER FILED		NUMBER EXTRA		e	asic fee	375.00	OR	BASIC FEE	750.00
OTAL CHARGEABLE CLAIMS		IV minus 20=		•		ſ	X\$ 9=		OR	X\$18=	
DEPENDENT CLAIMS		minus 3 =					X42=		OЯ	X84= .	
LTIPLE DEPENDENT CLAIM P		RESENT				•	+140=		OR	+280=	
he difference i	n column 1 is	less th	ain zero, ente	r "O" in c	olumn 2	L	TOTAL		OR	TOTAL	الم
	aims as a		DED - PAF		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	THAN
	(Column 1)		HIG	HEST MBER	PRESENT	Γ	•	ADDI-			ADDI-
	REMAINING AFTER AMENDMENT		PREV	NOUSLY D FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL
Total·	. 14	Minus	· · · · ·	7-1			X\$ 9=		OR	X\$18=	1
Water and a second	• 1 .	Minu		3	-		X42=	/	ОЯ	X84=	
FIRST PRESE	NTATION OF M	ULTIP	E DEPENDE	VT CLAUM			+140=	·	OR	+280=	
•	9					1	TOTAL ADDIT, FEE		OR	ADDIT, FEE	
•			IC4	umn 2)	(Column 3)	,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(Column 1) CLAIMS	1	HK	SHEST		٦		ADDI-	7		ADDI
Total Independent	REMAINING AFTER			MABER VIQUSLY	PRESENT	П	RATE	TIONAL	·	RATE	TIONA
	AMENDMENT		PA	D FOR	-	4		FEE	-	H-	
Total	- 14	Mini	s ••	<u> </u>	 - 	4	X\$ 9=	1/_	OF	X\$18=	-
Independent	•	Min		<u>ح</u>	<u> - (</u>	4	X42=	1/	O	X84=	
FIRST PRESE	NTATION OF I	MULTIP	LE DEPENDE	NT CLAIR		L	+140=	1		+260=	
•				•	•		101A	1	- ~	TOTA	
	•						ADDIT. FEE		To	ADDIT FE	
	(Column 1)	٠. · '	(Co	dumn 2)	(Column 3) .		. :	_:		
	CLAIMS			IGHEST LIMBER	PRESENT			ADD1-	1		ADD
	REMAINING AFTER		PRE	VIOUSLY	EXTRA		RATE	TIONAL	4	RATE	TION
	AMENDMEN	$\neg \vdash$		AUD FOR	1	1	Ve a	FEE	1_	X\$18=	
fotal	-	Min			1.	1	X\$ 9=	 	-10	``	┵
independent	*	NA.		ENT CLA		4	X42=		_ 0	R X84=	-
FIRST PARSECULATION OF MOCES							+140=		la	R +280	
" If the widty in column 1 is less than the entity in column 2, write "O" in column 3.							100		- [:	107	
" If the Property	lumber Previous	y Part P	OF BY 1100 OLL	CC II IELS	then 2 Autor 43	20.	ADDIT. FE	£		ADDIT FI	
Were Taggeory	jumber Previously imber Previously	y Paid Fo	for by thes spa or (toda) or ended	Zzel z SQ 2 (Instance	anns of each of	nber J	cound in the	appropriate	bex it	column 1.	· ·
I Da Laterate of	HIME LIELENDY							**		DEPARTMENT	

Application or Docket Number